

VOLUNTEER ROLE PLAYERS NEEDED

ENJOY ACTING?

MISS SERVING IN THE MILITARY?

LOOKING FOR A WAY TO HELP KEEP OUR COUNTRY SAFE?

MUSCATATUCK URBAN TRAINING CENTER



VISIT OUR WEBSITE AT

<http://www.atterburymuscatatuck.in.mil>

VOLUNTEER PROCESS

VISIT [HTTP://WWW.ATTERBURYMUSCATATUCK.IN.NG.MIL](http://www.atterburymuscatatuck.in.ng.mil)

PRINT OFF BACKGROUND CHECK AUTHORIZATION FORM

PLACE YOUR CONTACT INFORMATION(EMAIL AND PHONE) ON THE BACK OF YOUR BACKGROUND AUTHORIZATION CHECK ALONG WITH BEST TIME AND METHOD TO CONTACT YOU

SUBMIT YOUR BACKGROUND CHECK AUTHORIZATION FORM ATTACHED TO [P.O. BOX 77 BUTLERVILLE, IN 47223 ATTN. OPERATIONS-ROLE PLAYERS](#)

AFTER THE REVIEW AND ACCEPTANCE PROCESS, YOU WILL BE CONTACTED WITH FURTHER REGISTRATION INFORMATION

BACKGROUND CHECK AUTHORIZATION

Print: _____
(First) (Middle) (Last)

Former Name(s) and Dates Used: _____

Current address Since: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(MO/YR) (CITY) (ZIP/STATE)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: _____

DOB: _____

Telephone Number: _____

Drivers License Number/State: _____

The information contained in this application is correct to the best of my knowledge.

I hereby authorize Muscatatuck Urban Training Center, Camp Atterbury, and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes.

I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; credit reports, current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency to divulge any and all information, verbal or written, pertaining to me, to Muscatatuck Urban Training Center, Camp Atterbury or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security numbers, and dates of birth.

Signature : _____

Date: _____

CONTACT INFORMATION

Print: _____

(First)

(Middle)

(Last)

Former Name(s) and Dates Used: _____

Current address Since: _____
(Mo/Yr) (Street) (City) (Zip/State)

Email: _____

Telephone Number: _____

Signature : _____

Date: _____